

PHYSICAL CONTACT REPORT FORM

TO: EXECUTIVE DIRECTOR
NEW HAMPSHIRE INTERSCHOLASTIC ATHLETIC ASSOCIATION
251 CLINTON STREET, CONCORD, NEW HAMPSHIRE 03301-8432
(603) 228-8671 FAX (603) 225-7978 E-MAIL info@nhiaa.org

FROM: _____
(NAME OF OFFICIAL)

SUBJECT: REPORT OF VIOLATION OF NHIAA SPORTS OFFICIATING BY-LAW
ARTICLE IX, SECT 5 : "A player or coach who makes or causes non-accidental
physical contact with an official before, during, or after any NHIAA sanctioned
contest, other than to alert an official to an injury or other relevant circumstance,
shall be expelled from the game immediately and banned from further participation
in all sports for one calendar year (365 days) from the date of the offense."

REPORT OF INCIDENT

- 1) DATE OF EVENT: _____
- 2) SPORT: _____
- 3) TEAMS INVOLVED: _____
- 4) NATURE OF INCIDENT (PLEASE BE SPECIFIC AND INCLUDE NAMES AND
NUMBERS OF VIOLATORS):

SIGNATURE _____ DATE _____

***ALL INCIDENTS MUST BE REPORTED WITHIN 24 HOURS REGARDLESS OF THE
SEVERITY OF THE INCIDENT. A COPY OF THIS SHALL BE MAILED TO THE
SUPERVISOR OF OFFICIALS FOR YOUR SPORT.***